OAHU CANDIDATES-SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEE



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.") SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF REPORT: (a) Candidate Name: (See the Schedule of Reporting Dates to complete this section) 1st Preliminary Primary Amended Fourth (b) Committee Name: 2nd Preliminary Primary Short Form (c) Mailing Address: Final Primary Preliminary General REPORTING PERIOD (d) Phone (Bus) Final Election Period Treasurer's Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN A** COLUMN B **ELECTION PERIOD**² **TOTAL THIS PERIOD** TOTAL TO DATE Cash on Hand at the Beginning of the Election Period.2 Cash on Hand at the Beginning of this Reporting Period..... Total Receipts (From Line 15)..... Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... Total Loans at the Closing of this Reporting Period...... Total Unpaid Expenditures at the Closing of this Reporting Period..... Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge. Date

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less.

An Election Period is the temperary ported between action is a completion of only Section II, and Section III of this Disclosure Report.

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

40 INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AN	ID CANDIDATE COMMITTEE NAME:	PAGE	. OF		
Eriends of Su Anne Greorgi				VI	
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND VENDOR OR SOURCE OF NON-MONETARY CONT	ZIPCODE OF	PURPOSE OF EXPENDITURE OR DE NON-MONETARY CONTRIB	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	
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0/2	Lana	109-	Storp	185-	
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VÖ/8	NON-MONETARY CONTRIBUTION H Cayaa	= (1)	Storp o	906	
SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page)					
TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)					

	CHECK	ONLY ON	EBOX	***************************************
USE SEPARA	TE SCHEDUL	E(S) FOR E	ACH CATEGO	RY BELOW

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY SCHEDULE A

MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.								
	ND CANDIDATE COMMITTEE NAME:	PAGE) OF	į				
Friends of Julane Grorgi								
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE				
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE				
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	823-6672							
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2. TOTAL MON	ETARY AND NON-MONETARY CONTRIBUTIONS THIS PER e Line Number of the Disclosure Report – 11(a)(ii) or 11(b)	RIOD (Last Page Only) (Transfer total	92231					
is sist of the second	•		Form	n CC-5(A) (Rev. 5/99)				